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CONFIRMATION NO. 3517

<b>SERIAL NUMBER</b> 09/892,347	<b>FILING OR 371(c) DATE</b> 06/27/2001 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2629	<b>ATTORNEY DOCKET NO.</b> PU010055
<b>APPLICANTS</b> Donald Henry Willis, Indianapolis, IN;				
** CONTINUING DATA ***** This appln claims benefit of 60/275,186 03/12/2001				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/20/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 15
Verified and Acknowledged _____ Examiner's Signature Initials		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 24498				
<b>TITLE</b> REDUCING SPARKLE ARTIFACTS WITH POST GAMMA CORRECTION SLEW RATE LIMITING				
<b>FILING FEE RECEIVED</b> 1140	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	